Submit 3 Copies to Appropriate Dist. Office

<u>DISTRICT I</u> P.O. Box 1980, Hobbs, NM 88240

DISTRICT II P.O. Drawer DD, Artesia, NM 88210

State of New Mexico Energy, Minerals and Natural Resources Department

OIL CONSERVATION DIVISION

P.O. Box 2088 Santa Fe. New Mexico 37504-2088 Revised 1-1-8°,

INSTRIJCTIONS ON REVERSE

This form <u>is not</u> to be used for reporting packer leakage tests in <u>Northwest</u> New Mexico

SOUTHEAST NEW MEXICO PACKER LEAKAGE TEST

| | L PRODUCING | | | Lea | E. O. CARS | SON | | Well No. 19 |
|---|---------------------|---|---|-----------------|---|---------|-------------------------------|---------------------|
| Location of Well | Unit | Sec. 2 | 8 Twp | 21S | Rge 37E | | County LEA | |
| | Name of Re | eservoir or Pool | Ty pe of I (Oil or G | | Method of Pro Flow, Art Lift | | Prod. Medium (Tbg. or Csg) | Choke Size |
| Up per Co mpi | BLINEBRY (| PRO) (CONSOL | IDATED) | GAS | FLOW | | TBG | FULL |
| Lower Compl | TUBB (PROR | ATED GAS) | | GAS | FLOW | | TBG | FULL |
| | | | FL | OW TE | ST NO. 1 | | | |
| Both zones | s shut-in at (hour, | date): 8:4 | 45 AM 9 - 13- | -93 | | | | |
| Well opene | ed at (hour, date): | 8:4 | 45 AM 9-14- | -93 | | | Upper Completion | Lower Completion |
| Indicate by | (X) the zone pr | roducing | | | • | | | X |
| | | | | | | | | 200 |
| Stabilized? | (Yes or No) | ••••••••••••••••••••••••••••••••••••••• | ••••••••••••••••••••••••••••••••••••••• | •••••• | | ····· – | YES | YES |
| Maximum | pressure during te | est | ••••••••••••••••••••••••••••••••••••••• | •••••• | | | 140 | 200 |
| Minimum p | pressure during te | st | •••••• | •••••• | | | 140 | 100 |
| Pressure at | conclusion of test | t | • | •••••• | | ••••• | 140 | 100 |
| Pressure change during test (Maximum minus Minimum) | | | | | | | SAME | |
| Was pressu | re change an incr | ease or a decrease? | ? | | | | SAME | DECREASE |
| Well closed | l at (hour, date): | 8:45 AM 9- | -15-93 | | Total Time Production | e On | 24 HOURS | |
| Oil Producti During Test | | s; Grav | Gas Proc During T | fuction Test | 259 | | MCF; GOR | |
| Remarks | | | | | | | | |
| Well opened | d at (hour, date): | | FLC 9-16-93 | W TES | ST NO. 2 | | Upper | Lower |
| Indicate by (X) the zone producing | | | | | | | Completion | Completion |
| | | | | | | | X | |
| | | | | | | | 140 | 200 |
| | | | | | | | YES | YES |
| Maximum pi | ressure during tes | t | • | ••••• | ••••••••••••••••••• | | 140 | 200 |
| Minimum pr | essure during test | | | | | ····· | 40 | 200 |
| Pressure at c | onclusion of test. | ••••••• | •••••• | ••••• | | ••••• | 40 | 200 |
| Pressure char | nge during test (N | faximum minus M | linimum) | •••••• | | | 100 | SAME |
| | | use or a decrease?. | | ······ | fotal time on | — | DECREASE | SAME |
| | at (hour, date) | LEFT OPEN 9 | -17-93 | | roduction | 24 H | OURS | |
| Oil productio | n | | Gas Prociu | | | | | |

Remarks_

| | OPERATOR CERTIFICA I hereby certify that the inform and completed to the best of m | ATE OF COMPLIANCE ation contained herein is true by knowledge | OIL CONSERVATION DIVISION | | |
|-------|--|---|---------------------------|-------------------------------|--|
| MOBIL | EXPL & PROD US INC A | SAGENT FOR MPTM | Date Approved | OCT 08 1993 | |
| | Signature | Chazlicaded | By | Orig. Signed by Paul Kautz | |
| | CARLA C. GHAZIZAD Printed Name | EH ENV & REG ASST Title | Title | Geologist | |
| | 9/30/93 Date | (713) 775-2092 Telephone No. | | | |